



MISSOURI ANIMAL IDENTIFICATION PROGRAM
Premises Registration Form
(Please Print)

This form allows you to apply for a premises identification number.
Please fill in all applicable fields. Fields marked with an asterisk (*) are required.

PLEASE FILL OUT ONLY ONE APPLICATION PER PREMISES.
(Contact information will not be sold or given out by NAIS or MAIP without prior written consent)

Owner/Contact Name*:		Mailing Address*:		City*:		
County/State*:	Zip*:	Home Phone*:		Alternate Phone:		
E-Mail:			Business/Farm Name:			
GPS or Driving directions needed only if premises does not have a mailing address.						
Premises Address (If not the same as mailing address):			GPS Coordinates: Ex. N34°04'24"/W118°23'57"			
Driving directions:						
<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>						
What type of business do you have? Please circle or check all that apply.						
<input type="checkbox"/> Production Unit (farm, ranch, flock, feedlot, etc.)	<input type="checkbox"/> Clinic (location where animals are treated)	<input type="checkbox"/> Exhibition (fairs, shows)	<input type="checkbox"/> Laboratory			
<input type="checkbox"/> Market/ Collection Point	<input type="checkbox"/> Non-Producer	<input type="checkbox"/> Quarantine Facility	<input type="checkbox"/> Rendering			
<input type="checkbox"/> Slaughter Plant	<input type="checkbox"/> Tagging Site					
*Please circle or check domestic species at location:						
Bison	Cattle	Llama	Goats	Deer	Elk	Fish
Horses	Ratites	Shellfish	Sheep	Swine	Poultry	

Please allow 4-8 weeks for delivery of a premises identification card. In addition, a user name, account number, password and premise identification number will be assigned for future account updates.

MAIL OR FAX COMPLETED FORM TO:
Missouri Department of Agriculture
Animal Health – MAIP
P.O. Box 630
Jefferson City, MO 65102-0630
FAX: 573-526-0745

OR
Online at:
www.mda.mo.gov